## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000002428

Entity Name: CWS FLOORING, INC.

**FILED** Apr 15, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

P. O. BOX 8614 6025 S. W. 57TH AVE MADEIRA BEACH, FL 33738 OCALA, FL 34474 LIS

**Current Mailing Address: New Mailing Address:** 

P. O. BOX 8614 6025 S.W. 57TH AVE MADEIRA BEACH, FL 33738 US OCALA, FL 34474 US

FEI Number: 20-0560633 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RUSSELL, DENINE D SCHENKEL, CHRISTOPHER W 6025 S.W. 57TH AVE 15468 GULF BLVD. MADEIRA BEACH, FL 33708 OCALA, FL 34474 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CHRISTOPHER SCHENKEL 04/15/2006

> Date Electronic Signature of Registered Agent

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: () Delete SHENKEL, CHRISTOPHER W Name:

15468 GULF BLVD. Address:

City-St-Zip: MADEIRA BEACH, FL 33708 US

Title: (X) Delete RUSSELL, DENINE D Name:

15468 GULF BLVD. Address: MADEIRA BEACH, FL 33708 US City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition SHENKEL, CHRISTOPHER W Name: 6025 S.W. 57TH AVE Address: City-St-Zip: OCALA, FL 34474 US

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER SCHENKEL **PRES** 04/15/2006